Health Equity Summit Opening Remarks on April 2, 2012

Acknowledgments

On behalf of Governor Christie, welcome to the Department's Health Equity Summit entitled "Health Equity for All, Think Nationally, Act Locally."

Health providers, community leaders—all of you play a critical role in eliminating disparities in our diverse communities. I am so pleased that so many of you joined us today.

This summit is a great opportunity for all of you to share the great work that you are doing & identify strategies we can replicate across the state to move NJ toward its' ultimate goal of eliminating health disparities and achieving health equity for all residents.

Minority Health Month

Today we are also kicking-off a month-long series of events across the state to raise awareness of minority health issues and health disparities in recognition of Minority Health Month.

Throughout the month of April—Carolyn, Deputy Commissioner Dr. Arturo Brito, Assistant Commissioners and other staff will be attending events to bring greater attention to the need for health equity, but also to highlight the work our FQHCs & other community partners are doing.

Working Smarter

The Department relies on the tremendous work you do every day to improve the health of all our residents and we are proud to support the work you do in our diverse communities. We are all challenged with limited resources, so as a Department we are focusing efforts on where the greatest impact can be achieved.

Through the development of our state health plan, Healthy New Jersey, the department is breaking down silos in order to achieve two major goals—eliminating health disparities and creating environments that promote good health.

We've broadened our reach by collaborating with external partners to secure the best available data and resources to build a robust plan. We are also asking our local health partners to use the same measures—so we are working collectively toward common goals.

Health areas addressed include obesity, HIV/AIDS, cancer, and infant mortality—areas where there are significant disparities in outcomes among various racial/ethnic groups in New Jersey. We are analyzing the impact that our programs have had in reducing disparities and using that data to inform our decisions.

HIV/AIDS

Two weeks ago, I announced \$8 million in grants to support care of residents with HIV/AIDS. When evaluating requests for funding, we chose grantees that maximize resources to best reach those in need.

Increased funding went to grantees like the Henry J Austin Health Center in Trenton because of its comprehensive approach to care. They have consolidated all services in one health home—to minimize barriers to care for patients by providing all services in one place. And Henry J. Austin is seeing better health outcomes for patients as a result of this approach.

Thanks to strong health leaders like Henry J. Austin, NJ has seen great advances in the fight against HIV/AIDS.

In fact, there has been a 68% decline in the annual number of new cases of HIV/AIDS between 2000 and 2009. In 2010, only 4 infants in NJ were born HIV Positive – a drop of 90% since 2000. And while successes such as these should be celebrated, we still see significant disparities and much more needs to be done – especially among NJ's African American population, who are disproportionately affected by HIV/AIDS.

African Americans are 14% of NJ's total population; however they represent 54% of those living with HIV/AIDS in the state. And alarmingly, the rate of HIV/AIDS infection among African American women was 32 times higher than among white women between 2007 and 2009. And nearly 70% of children living with HIV/AIDS are African American.

These disparities are unacceptable, and DHSS relies on community partners--like all you-- to provide care and help us fight the battle against HIV/AIDS.

Obesity/Shaping NJ

Another area where we see large disparities is in the number of overweight and obese residents. In New Jersey, obesity is more prevalent among blacks at 36% than whites at 23% and Hispanics at 27%.

Our Department's key program dedicated to promoting nutrition and fitness and preventing obesity is *Shaping NJ*. *ShapingNJ* is collaborative effort of more than 180 diverse stakeholders—including businesses, community-based organizations and national and state leaders—working together for policy and environmental changes that will make NJ a healthier place to live.

In the past, obesity prevention focused on the individual, but through *Shaping NJ* we are focused on creating environments that support healthy behavior – to make "the healthy choice the easy choice."

Recognizing that we need to reduce disparities and ensure all communities have access to healthy food and places to exercise, the Department joined with *Shaping NJ* partners to fund local projects that promote physical activity and healthier eating in communities.

Ten grants ranging from \$7,500 to \$15,000 were awarded to communities across the state including the city of Paterson and the townships of Irvington and Montclair to create community gardens, farmers' markets, walking clubs and improve local recreation trails.

This program recognizes that intersection between our environment and our health—a topic which will be explored further today by a number of speakers—issues like the urban environment, housing and cultural competency.

OMMH

The Department's Office of Minority & Multicultural Health leads our efforts to eliminate disparities and works closely with our Shaping NJ and HIV/AIDS programs.

Just as the Department is refining our efforts to work smarter, the Office of Minority & Multicultural Health is transitioning to an outcome-based focus. They are re-examining what strategies have worked well in the past and how to replicate them on a larger scale.

Through the Office's Community Mobilization grants—we will collect data necessary to measure success. Two of those grantees—that are here today—Hispanic Family Center of Southern New Jersey and the Henry J. Austin Health Center have had great success in reducing pediatric asthma in their communities.

Both providers were able to significantly reduce ER visits for asthma. Improved health also resulted in reduced school absences related to asthma. Henry J. Austin reduced absences 82% and Hispanic Family Center reduced absences by 63%. Allowing these children to stay healthy, go to school and learn.

These are just two examples of important work being done around the state to eliminate disparities. There is a fantastic roster of health care experts who are speaking today to share their success at improving the health of our diverse communities. They are doing groundbreaking work across our state to create a more inclusive health system and we are very lucky to have them participating in this summit. I want to thank them for being here today.

I want to thank all our partners here today for the outstanding work they do every day to improve the health of our diverse communities.

The Department has a long history of working to achieve health equity through strategic collaborations with community and faith-based organizations and health providers—we look forward to furthering this progress to ensure equity in our health care system— and ensure all New Jerseyans can achieve their greatest potential.